

South Dakota Arts Council 800 Governors Drive Pierre, SD 57501-2294

GRANT AGREEMENT

PAYMENT PROCEDURE: To receive payment of your grant award, the grantee must complete, sign and return the following documents:

- (1) this **Grant Agreement**;
- (2) **Request for Payment form**, asking for no more than what will be spent within a 60-day period;
- (3) Grant Terms and Conditions document;
- (4) **W-9**, indicating the tax identification or social security number of the grantee.

GRANTEE NAME: _				
Contact Person (if diffe	erent from Grantee na	med above):		
Address:(Street Address / PO Box)		(City)	(State)	(Zip)
Daytime telephone nun	nber:	Email address:		
Grant title (if applicabl	e):			
Grant Type (check only 1) Artist Grant Artist Collaboration Gra Traditional Arts Apprent Grants to Schools & Or Arts Challenge Grant Excursion Grant Importation of Musician Total Amount of the Grant: (As indicated in your Grant Award Letter) AGREEMENT: I understand and agree that grant application. The undersigned is authorized to comin an accompanying Grant Terms and Condition and returned with this Grant Agreement.		exprenticeship Grant & Organizations ant sician Grant at granted funds are to be a commit the grantee to a	Performing Arts Barrofessional Devel Project Grant SDAC Initiative Statewide Services Technical Assistan used only for the purposes bide by grant terms and control of the purposes and control of the purposes bide by grant terms are purposed by the purposes bide by grant terms are purposed by the purpose by the pu	Native American Youth ank opment Grant Grant ce Grant set forth in my onditions as set forth
Signature of Grant Recipient or Recipient's Authorizing Official		Date		
Address	City/State/Zi	p Code	Phone	
APPROVED BY:	Signature of Authorize	ed SDAC Official	Date	